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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

HD None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

HD None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <u>HD</u> Initials				

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TITLE

COMFORT OPTICS VISOR

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